



A PHI Company

PART 1

DELAWARE LEVEL 1 INTERCONNECTION APPLICATION & AGREEMENT

With Terms and Conditions for Interconnection
(Lab Certified Inverter-Based Small Generator Facilities Less than or Equal to 10 kW)

(Application & Conditional Agreement – to be completed prior to installation)

INTERCONNECTION CUSTOMER CONTACT INFORMATION

Customer Name: Manish Garg

Mailing Address: 10 Equestrian Circle

City: Hockessin State: DE Zip Code: 19707

Contact Person (If other than above): _____

Mailing Address (If other than above): _____

Telephone (Daytime): 302-893-8901 (Evening): _____

Facsimile Number: _____ E-Mail Address (Required): mgarg321@gmail.com

Alternate Contact Information

Name: _____

Mailing Address: _____

City: _____ State: _____ Zip Code: _____

Telephone (Daytime): _____ (Evening): _____

Facsimile Number: _____ E-Mail Address: _____

FACILITY INFORMATION

Facility Address: 10 Equestrian Circle

City: Hockessin State: DE Zip Code: _____

DPL Account # of Facility Site: 3401-9789-9974

Energy Source: Photovoltaics Prime Mover: Photovoltaics

Type of Application: Initial ☒ Addition/Upgrade ☐ ¹

DC Nameplate Rating: 8.1 (kW) _____ (kVA), AC Inverter Rating 8.0 (kW), AC System
Design Capacity: 7.983 (kW) _____ (kVA)

¹ Initial if first time generator request. Addition/Upgrade if this is an add-on to a previously approved system.

Generator (or PV Panel) Manufacturer, Model #: SW 270 Mono (30)
(A copy of Generator Nameplate and Manufacturer's Specification Sheet May Also be Submitted)

Inverter Manufacturer: SMA Model # & Rating: SB-4000TL-US-22
Number of Inverters: 2

Ampere Rating: 30 Amps_{AC}, Number of Phases: ☒ 1 ☐ 3, Voltage Rating: 240
V_{AC},

Nominal DC Voltage: 360 V_{DC}, Power Factor: 96.5 %, Frequency: 60 Hz,
DPL Accessible Disconnect or Lock Box: ☒ Yes ☐ No, If Yes, Location: at meter

One-line Diagram Attached (Required): ☒ Yes ☐ No, Site Plan Attached (Required): ☒ Yes ☐ No

Do you plan to export power?² ☒ Yes ☐ No, If Yes, Estimated Maximum: _____ kW_{AC}

Estimated Gross Annual Energy Production: _____ kWh

Is the inverter IEEE/UL1741 lab certified? Yes ☒ No ☐ (If yes, attach manufacturer's cut sheet showing listing and label information from the appropriate listing authority, e.g. UL 1741 listing. If no, facility is not eligible for Level 1 Application.)

Estimated Commissioning Date: _____

EQUIPMENT INSTALLATION CONTRACTOR Check if owner-installed ☐

Name: Liberty Services Co
Mailing Address: 812 Philadelphia Pike
City: Wilmington State: DE Zip Code: 19809
Telephone (Daytime): 302-660-2187 (Evening): _____
Facsimile Number: _____ E-Mail Address (Required): sbmiller@goliberty.co

ELECTRICAL CONTRACTOR

Name: Jerry Taylor
Mailing Address: 812 Philadelphia Pike
City: Wilmington State: DE Zip Code: 19809
Telephone (Daytime): 302-660-2187 (Evening): _____
Facsimile Number: _____ E-Mail Address: sbmiller@goliberty.co
License number: DE 1032
Active License? Yes ☒ No ☐

Is small generator facility eligible for Net Metering? Yes ☒ No ☐

² Yes, if your expected maximum output of the inverter (kW AC) is greater than the lowest load you anticipate at your facility during maximum PV output (kW). The difference would be the amount you may export.

INSURANCE DISCLOSURE

The attached terms and conditions contain provisions related to liability and indemnification, and should be carefully considered by the interconnection customer. The interconnection customer is not required to obtain general liability insurance coverage as a precondition for interconnection approval; however, the interconnection customer is advised to consider obtaining appropriate insurance coverage to cover the interconnection customer's potential liability under this agreement.

CUSTOMER SIGNATURE

I hereby certify that: 1) I have read and understand the terms and conditions which are attached hereto by reference and are a part of this Agreement; 2) I hereby agree to comply with the attached terms and conditions; and 3) to the best of my knowledge, all of the information provided in this application request form is complete and true. I consent to permit the PSC and interconnecting utility to exchange information regarding the generating system to which this application applies.

Interconnection Customer Signature: Garg Date: 6/28/14
Printed Name: M. GARG Title: _____

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Conditional Agreement to Interconnect Small Generator Facility (for EDC use only)

Receipt of the application fee is acknowledged and, by its signature below, the EDC has determined the interconnection request is complete. Interconnection of the small generator facility is conditionally approved contingent upon the attached terms and conditions of this Agreement the return of the attached Certificate of Completion duly executed, verification of electrical inspection and successful witness test or EDC waiver thereof.

EDC Signature: _____ Date: _____
Printed Name: _____ Title: _____



A RE Company

PART 2

DELAWARE INTERCONNECTION APPLICATION & AGREEMENT

With Terms and Conditions for Interconnection
(Lab Certified Inverter-Based Small Generator Facilities Less than or Equal to 10 kW)
(Final Agreement – must be completed after installation and prior to interconnection)

Certificate of Completion

INTERCONNECTION CUSTOMER CONTACT INFORMATION

Name: Manish Garg
Mailing Address: 10 Equestrian Trail
City: Hockessin State: DE Zip Code: 19707
Telephone (Daytime): 3028938901 (Evening): _____
Facsimile Number: _____ E-Mail Address: mgarg321@gmail.com

FACILITY INFORMATION

Facility Address: 10 Equestrian Trail Circle
City: Hockessin State: DE Zip Code: 19707

DPL Account # of Facility Site: 3401-9789-9974

Energy Source: Photovoltaics Prime Mover: Photovoltaics
DC Nameplate Rating: 8.1 (kW) _____ (kVA), AC Inverter Rating 8.0 (kW), AC System
Design Capacity: 8.375 (kW) _____ (kVA)

Inverter Manufacturer: SMA Model # & Rating: 4000 TLUS22
Number of Inverters: 2

EQUIPMENT INSTALLATION CONTRACTOR

Check if owner-installed ☐

Name: Liberty Services Company
Mailing Address: 5700 Kirkwood Highway
City: Wilmington State: DE Zip Code: 19808
Telephone (Daytime): 3026602187 (Evening): _____
Facsimile Number: 302-397-2504 E-Mail Address: solar@golliberty.co

FINAL ELECTRIC INSPECTION AND INTERCONNECTION CUSTOMER SIGNATURE

The Small Generator Facility is complete and has been approved by the local electric inspector having jurisdiction. A signed copy of the electric inspector's form indicating final approval is attached. The Interconnection Customer acknowledges that it shall not operate the Small Generator Facility until receipt of the final acceptance and approval by the EDC as provided below.

Signed:  Date 5/5/15
(Signature of interconnection customer)

Printed Name: M. GARG

Type of Application: New/Initial ☒ Growth/Increase ☐ System Capacity 8.1 KW (DC)

Check if copy of signed electric inspection form is attached ☒

ACCEPTANCE AND FINAL APPROVAL FOR INTERCONNECTION (for EDC use only)

The interconnection agreement is approved and the Small Generator Facility is approved for interconnected operation upon the signing and return of this Certificate of Completion by EDC:

Electric Distribution Company waives Witness Test? (Initial) Yes DLB No ()
If not waived, date of successful Witness Test: () Passed: (Initial) ()

EDC Signature:  Date: 6/26/15

Printed Name: Diana C. DeAngelis Title: Regulatory Affairs head

EAGLE INSPECTION AGENCY, LLC
57 MATTHEWS ROAD, NEWARK, DE 19713-2555
DIRECT PHONE: 302-379-3635 OFFICE & FAX: 302-368-1312

CERTIFICATE OF APPROVAL
FOR
FIRE/SAFETY INSPECTION

THIS CERTIFICATE OF APPROVAL IS FOR ELECTRICAL INSPECTION
OF THE BELOW LISTED PERSONS OR BUSINESS DESIRING APPROVAL
FOR THE BUILDING OR PREMISES DESCRIBED.

Jerry D. Taylor, Master License #T1-0001032, expires 06/30/16
and Liberty Services Company

FOR

Manish Garg, 10 Equestrian Circle, Sanford Ridge, Hockessin, DE 19707

THIS CERTIFICATE OF APPROVAL FOR ELECTRICAL INSTALLATIONS
CONSTITUTES APPROVAL OF WIRES AND EQUIPMENT INSPECTED TO DATE.
IF ANY ALTERATIONS ARE MADE TO THE EXISTING SYSTEM, A NEW
APPLICATION FOR INSPECTION SHALL BE SUBMITTED TO THIS AGENCY.

TYPE OF INSPECTION

Final inspection for solar panels and equipment wiring and connections

THE ABOVE WIRING AND EQUIPMENT HAVE BEEN INSPECTED AND ARE
IN ACCORDANCE WITH THE NATIONAL ELECTRICAL CODE [NEC]
AND THE NATIONAL FIRE PROTECTION ADMINISTRATION [NFPA].

NOT AN EQUIPMENT GUARANTEE

INSPECTED BY: John Graden
JOHN C. GRADEN, NEC CODE INSPECTOR
License No. T6-0000113

DATE OF FINAL INSPECTION: December 18, 2014